



Absentee Registration and Voting Brief For Soldiers

The Uniformed and Overseas Citizens Absentee Voting Act

Authorizes absent uniformed services voters and their eligible family members to use absentee registration procedures and vote by absentee ballot in general, special, primary, and runoff elections for Federal office

☑Authorizes the use of the FPCA for simultaneous voter registration application and absentee ballot

application

In 2006 - Election of:

33 U.S. Senators





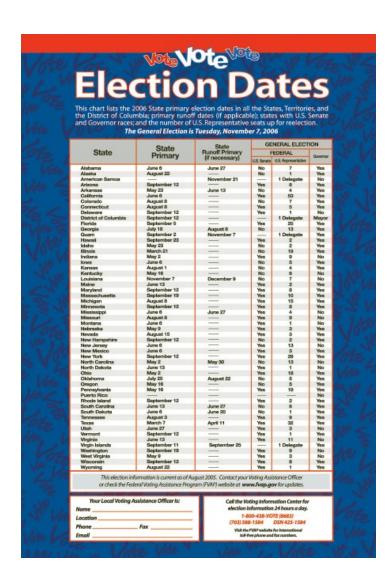
435 U.S. Representatives

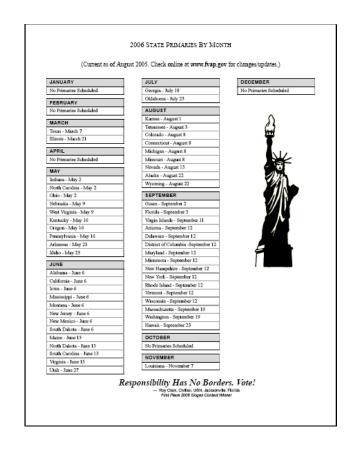
37 State Governors



What's Available

2006 Election Dates Poster





Your Voting Assistance Officer's

- ☑ Brief you on your right to vote
- ☑ Assist you and your eligible family members in registering to vote
- ☑ Assist you and your eligible family members in casting election ballots

Upcoming Voter Events

- ✓ Army Voter Registration Month (August 2006)
 ✓ Unit Voting Assistance Officers (UVAOs) will be going around to brief and assist all Soldiers in registering to vote
- ☑ Armed Forces Voters Week (September 3-9, 2006)
 - ✓UVAOs will be going around to assist Soldiers who were not able to register in August.
- ✓ Absentee Voting Week (October 8-14, 2006)
 ✓ UVAOs will encourage and assist in the completion and the mailing of absentee ballots prior to the General election. Absentee ballots should be mailed NLT 14 days prior to the

Voter Registenisibilitiese

- **☑** Register for State and federal elections
- **☑** Register to Vote using the FPCA
- **☑** Update current address using the FPCA
- **☑** Complete the FPCA according to state procedures
- (See your Voting Assistance Officer for assistance)
 - **☑** Write legibly
- **☑** Sign and Date the Form
- **☑** Send FPCA to local election office

Voter Respo**votibu**ities:

- **☑** What's my registration status
 - ✓ Several states allow you to check registration online
 - ✓ Select "State Election Sites" from FVAP website and follow links to state or local election official
 - **✓** Email local election official

Voter RespoiΩib**H**ities:

- **☑** Check status of ballot request
- **☑** If there are problems go to your VAO
- **☑** Promptly vote and return the ballot
- ☑ If the ballot has not been received, vote and send in the FWAB
- ☑ Follow state instructions accompanying ballot

Federal Post Card Application (FPCA, SF-76)

| After completion, fold to inside and seal before mailing.) WARRING: Knowingly presenting rabe information in this application could result in criminal sanctions. REGISTRATION AND ABSENTEE BALLOT REQUEST - FEDERAL POST CARD APPLICATION (FPCA) 1. I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (Mark only one): (a) A MEMBER OF THE UNFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSS OR DEPENDENT (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY 2. INT INFORMATION (Required) 3. TYPEO OR PRINTEE TO MAKE (Last, First, Mode) 7. TELEPHONE NUMBER (No CSN Aumber, Include all international prefixes) 8. EMAL ADDRESS 3. INT VOTING RESIDENCE ADDRESS (Required) (Millay), use legal residence - Constant States, and all semantical prefixes) 9. STATE DRIVERS IN CONTROL AS P. O. BOLD 1. I PREFIX TO RECEIVE MY ASSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 1. INDUSER VAND STREET (Connot by a P. O. BOLD 2. I PREFIX TO RECEIVE MY ASSENTEE BALLOT, AS PERMITTED BY MY STATE, BY: 3. INT CURRENT ADDRESS (Where T No ROBENE (Coptional), but may be required by states to page states and some states of the state of the stat | PRIVACY ACT STATEMENT AUTHORITY: 40 USC 19736f. Tide 1 - Registration and Voting By Absence Uniformed Services Voers and Overseas Voers in Electories for Federal Office.* PRINCEPLA PURPOSE; Service as in populating for registrating and or sequest for shounds ballet for all persons covered by the Uniformed and Overseas Chine ASS CLOSURE. Volumes, browner, failure to generally information ASS CLOSURE. Volumes, processing this request and may prevent you from voting showner. SPECIFIC INSTRUCTIONS FOR COMPLETION. Please use the Voting Assistance Guide for specific state-by-state information when completing the form. Type or prure feighty. Assistance officers, u.S. Embassy and Constant. Voting Assistance officers, u.S |
|--|--|
| 7. AFFIRMATION (Required) 1 swear or affirm, under penalty of perjury, that: 1. I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., and 2. I am a U.S. ottzen, at least 19 years of age (or will be by the cay of the election), eligible to vote in the requested jurisdiction, and 3. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been rehistated, and guidesting a shallor, or voting in any other judication in the U.S., and 4. I am not registering, or questing a shallor, or voting in any other judication in the U.S., and 5. My signature and date below indicate when I completed this document, and 6. The information on this form is true and complete to the best of my knowledge. I understand that a material misstalement of fact in competent on of this document may constitute grounds for conviction of perjury. Signed: Date: Date: M M D D Y Y Y (Witness Notary and address (if required)) Additional benigner 8.0 | OFFICIAL ABSENTEE BALLOTING MATERIAL - FIRST CLASS MAIL NO POSTAGE NECESSARY IN THE U.S. MAIL - DMM 703.8.0 TO: |

| REGISTRATION AND ABSENTEE BALLOT REQUEST - FEDERAL POST CARD APPLICATION (FPCA) |
|--|
| 1. I REQUEST ABSENTEE BALLOTS FOR ALL ELECTIONS IN WHICH I AM ELIGIBLE TO VOTE AND I AM (Mark only one): |
| (a) A MEMBER OF THE UNIFORMED SERVICES OR MERCHANT MARINE ON ACTIVE DUTY, OR AN ELIGIBLE SPOUSE OR DEPENDENT |
| (b) A U.S. CITIZEN RESIDING OUTSIDE THE U.S. TEMPORARILY |
| (c) A U.S CITIZEN RESIDING OUTSIDE THE U.S. INDEFINITELY |

Block 1: Register/Request Ballot

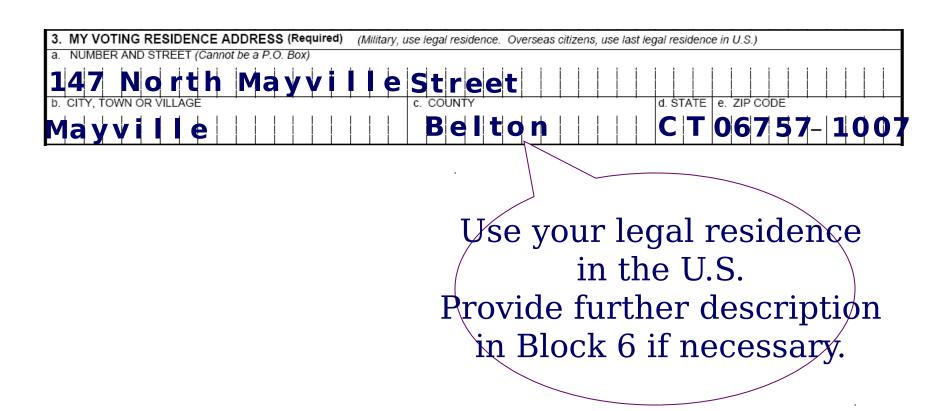
| 6. ADDITIONAL INFORMATION (Designate the period for which you want to receive ballots - see instructions for Block 6, paragraph (3). Consult the Voting Assistance Guide for other specific state instructions.) |
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Block 6: Additional Information

| 2. MY INFORMATION | |
|--|---|
| a. TYPED OR PRINTED NAME (Last, First, Middle) | SUFFIX (Jr., sr., III, etc.) b. PREVIOUS NAME (if applicable) |
| Jones James Larry | |
| c. SEX d. RACE e. DATE OF BIRTH f. SOCIAL SECURITY NUMBER | g. STATE DRIVER'S LICENSE OR I.D. NUMBER |
| MXF 05171925 - - | 1125-XY-145577712 |
| h. TELEPHONE NUMBER (No DSN number; include all international prefixes) i. FAX NUMBER | No DSN number; include all international prefixes) |
| | [45 +7771 |
| j. EMAIL ADDRESS | |
| jj.pdf57@hawkstooth.com | |
| | |

Include a fax number and email address.

Block 2: My Information



Block 3: My Voting Residence

FPCA vofing Residence

- ☑ Physical presence in the state and intent to remain or make the state your home or domicile
- **☑** One legal residence
- **A conscious decision**
- ☑ Voting address good as long as you are on active duty
- ☑ Spouses can have a different legal residence
- **☑** Cannot arbitrarily choose

Remember to notify your LEO of all address changes!

| 4. WHERE TO SEND MY VOTING MATERIALS | |
|---|------------------------|
| a. MY CURRENT ADDRESS (Where I live now) (Required) | DanoDano |
| James Larry Jones | |
| 123 Larkin Drive | |
| Fort Bliss TX 79916 | |
| | |
| c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STA | TE, BY: MAIL FAX EMAIL |

Block 4: Where To Send My Voting Materials

| 4. WHERE TO SEND MY VOTING MATERIALS | |
|---|---|
| a. MY CURRENT ADDRESS (Where I live now) (Required) | MY FORWARDING ADDRESS (NOTE: Complete 4b. only if you do not want your ballot mailed to the address in Block 4a.) |
| James Larry Jones | |
| 123 Larkin Drive | |
| Fort Bliss TX 79916 | |
| | |
| c. I PREFER TO RECEIVE MY ABSENTEE BALLOT, AS PERMITTED BY MY STA | TE, BY: MAIL FAX EMAIL |

Check Chapter 3 for state alternatives for receiving the ballot!

Block 4: Where To Send My Voting Materials

S. MY POLITICAL PARTY PREFERENCE (Optional, but may be required by states to register to vote in primary elections):

Required by most states to vote in the primaries.

Block 5: My Political Party Preference

| ADDITIONAL INFORMATION (Designate the period for which you want to Consult the Voting Assistance Guide for other specific state instructions.) | |
|--|--|
| Last date lived in Mayville: Feb. 200 | 2 |
| | CONNECTICUT |
| | "Due to military contingencies, I am unable to follow the regular absentee |
| | ballot application process. I request a special write-in ballot." |
| | |

Provide additional information that may assist local election official in approving this application.

Block 6: Additional Information

7. AFFIRMATION

I swear or affirm, under penalty of perjury, that:

- I am a member of the Uniformed Services or merchant marine on active duty or an eligible spouse or dependent of such a member, or a U.S. citizen temporarily residing outside the U.S., or other U.S. citizen residing outside the U.S., and
- 2. I am a U.S. citizen, at least 18 years of age (or will be by the day of the election), eligible to vote in the requested jurisdiction, and
- I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, my voting rights have been reinstated, and
- 4. I am not registering, requesting a ballot, or voting in any other jurisdiction in the U.S., and
- 5. My signature and date below indicate when I completed this document, and
- 6. The information on this form is true and complete to the best of my knowledge.

I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury.

Signed: **James L.** Date: 0 8 0 7 2 0 0 6 Signed: (Witness/Notary and address (if required)) Date: M M D D Y Y Y Y

he information contained netein is for official use only. Any unauthorized release of this information may be punishable by law.

Applicant must read, sign (in presence of notary if required) and date.

Block 7: Affirmation

PRIVACY ACT STATEMENT

AUTHORITY: 42 USC 1973ff, "Title 1 - Registration and Voting By Absentee Uniformed Services Voters and Overseas Voters in Elections for Federal Office." FRINCIPAL FURP OSE: Serves as an application for registration and/or request for absence ballot for all persons covered by the Uniformed and Overseas Citizens for absentee ballot for Absentee Voting Act.

DISCLOSURE: Voluntary; however, failure to provide the necessary information may keep the pertinent jurisdiction from processing this request and may prevent you from voting absentee.

SPECIFIC INSTRUCTIONS FOR COMPLETION.

Please use the Voting Assistance Guide for specific state-by-state information when completing this form. Type or print legibly.

Assistance and information regarding the use and completion of this form, as well as specific state information may be obtained from military Unit Voting Assistance Officers, U.S. Embassy and Consular Voting Assistance Officers, or organizations of U.S. citizens overeas and http://www.fvap.gov.

Block 1. Place an X only in one block. Marking Block 1(c) generally means that you were a resident of that state before departing the U.S. and your intent to return at some time in the future is uncertain. Marking Block 1(c) applies for a Federal ballot only (if one is printed by the state). Block 2. MY INFORMATION. Block 2d. RACE. This information is requested from some states for statistical purposes by the Department of Justice in their enforcement of the Voting Rights Act and the National Voter Registration Act. See Voting Assistance Guide.

Block 3. MY VOTING RESIDENCE ADDRESS. Enter the complete legal voting residence address (including county) where you ACTUALLY LIVED in the state or territory. Your right to vote in your state and determination of your voting precinct depend on the physical location of your residence while you were in the state. DO NOT USE A POST OFFICE BOX NUMBER. In an area with no street names, indicate route name and number and box number. Also provide any additional information necessary to physically describe your residence location. If Substitute the first th

Block 4. WHERE TO SEND MY VOTING MATERIALS. Block 4a is the complete mailing address where you are now living. If you have an alternate address or an address of a mail forwarding service that delivers your mail more quickly, enter that address in Block 4b. If your state allows your man more quarty, enter on anothers in those 40. It your state amove a desentee ballots to be sent via e-mail or fax, check the appropriate box in Block 40. See Voting Assistance Guide. This form should be resubmitted every time you change your mailing address.

Block 5. MY POLITICAL PARTY PREFERENCE. This is an optional

entry, however, this information is required by most states in order to vote in primary elections. Consult the Voting Assistance Guide for any specific state information required.

Block 6. ADDITIONAL INFORMATION.

Block 6. ADDITIONAL INFORMATION.

(1) Provide any information that may assist the local election official in approving this application. It would be helpful if you provide the date you last lived at the address in Block 3a and if you list a name and telephone number of a local contact in the event the local election official cannot contact you and has a question concerning the application.
(2) If you were previously registered to vote in a jurisdiction other than the

one in which you are applying, indicate *previously registered in (location)."

(3) Submission of this form serves as a request to receive ballots for all Federal elections held through the next two regularly scheduled general elections. If you do not wish to receive ballots for that length of time, you may request a ballot for each election for Federal office held in the next election year OR a ballot for only the next scheduled election for Federal office by noting your choice in Block 6. (Depending on your state of residence, you may also receive ballots for State and local offices during

the selected period as well.)

(4) If your state provides a special state write-in ballot and you are requesting one, indicate the reason you are requesting a special write-in ballot or place a sticker from the Voting Assistance Guide in this section. Block 7. AFFIRMATION. Ensure that you read the oath, sign, and enter the date you completed the form in the spaces provided. Not all travel require a witness or notary, and tates laws vary regarding the voting of convicted felom. Consult your state section of the Voting Assistance

| FROM: (Voter name and current complete military or overseas mail | ng address) | | U.S. Postage Paid 39 USC 3406 |
|---|---|------------------------|----------------------------------|
| | FILETION | All | PAR AVION |
| International airmal poolage is required if not mailed in the System or APO/PPO System, or Diplomatic Pour OFFICIAL | U.S. Postel th. ABSENTEE BALLOTING MATER | IAL - FIRST CLASS MAIL | |
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Local **Electio Official Mailing** Address (flip-

See citizen's state of residence in "Where To Send It" section of Chapter 3.

FROM: U.S. Postage Paid (Voter name and current complete military or overseas mailing address) 39 USC 3406 James Larry lones PAR AVION **USS FVAP FPO AE 54321** MAILING ENVELOPE: International airmail postage is required if not mailed in the U.S. Postal Sam or APO/FPO System, or Diplomatic Pouch. OFFICIAL ABSENTEE BALLOTING MATERIAL - FIRST CLASS MAIL NO POSTAGE NECESSARY IN THE U.S. MAIL - DMM 703.8.0 **Chautauqua County Board of Elections Gerace Office Building 3 North Erie Street** Mayville, CT 06757-1007 Citizen's Name and **Local Election** Current Official's **Mailing Mailing Address** Address

On-Line FPCA SF-76A

| if you or the local election official will REGISTRATION AND | be transmitting any of your elect | | | | RD APPLICATION (FPCA) | \neg |
|--|--|---|-----------------------------|----------|---|----------|
| APPLICATION FOR STATE OF | COUNTY OF | | CITY OR | TOWNSHI | SHIP OF § | |
| IR | EQUEST ABSENTEE BALLOTS FO | R ALL ELECTIONS | IN WHICH I AM | ELIGIBLE | BLE TO VOTE. | |
| 1. APPLICANT INFORMATION (See Instruction | , | | | | POLITICAL PARTY AFFILIATION (This information is required by most states to send you a ballot for primary elections. See Instructions.) | |
| a. TYPED OR PRINTED NAME (Last, First, Middle Initia | n() | | b. SEX | c. RACE | CE | |
| d. DATE OF BIRTH a. SOCIAL SECURITY | NUMBER f. OTH | ERIDENTIFICATION NO | . (passport, ID card) | | REMARKS (Provide additional information which will assist local election officials in determining your eligibility to register and vote. See Instructions.) | |
| MM DD YYYY | | | | | _ | |
| 2. I LAST VOTED or PLACE OF LAST REGIS a. YEAR b. COUNTY, CITY, OR TOWNSHIP | | ınk. See instructions.) EGISTRATION NO. (If kn | nown) | | | \dashv |
| YYYY | | | | | 8. AFFIRMATION BY APPLICANT | \dashv |
| 3. VOTING RESIDENCE (For military, legal residence in U.S. IF USING RURAL ROUTE, SEE | | | a. LAST DATE O RESIDENCY | | X only one: a, b, c or d I swear/affirm, under penalty of perjury, that I am: (See Instructions) | |
| b. NUMBER AND STREET (Do not use Post Office Box) | · | | M M D D | YYYY | on active duty, or an eligible spouse or dependent. | \dashv |
| c. CITY, TOWN OR VILLAGE | | | | d. STATE | c. a U.S. citizen overseas by virtue of employment or | \dashv |
| e. COUNTY OR PARISH | | f. ZIP CODE (9 -digit | t, if known) | | accompanying spouse or dependent. d. other U.S. citizen residing outside the U.S. | - |
| | | | | | e. I am a U.S. citizen, eligible to vote in the above jurisdiction, | \neg |
| 4. MAIL ABSENTEE BALLOT TO: (Mailing add | iress where you want the ballot to be sent.) | | | | and subscribe to any required state/local oath or statement. | |
| | | | | | f. I have not been convicted of a felony or other disqualifying offense or been adjudicated mentally incompetent, or if so, | |
| | | | | | my voting rights have been reinstated. g. I am not registering, requesting a ballot, or voting in any | |
| | | | | | other jurisdiction in the U.S. | |
| | | | | | h. The information on this form is true and complete. | |
| | | | | | L SIGNATURE OF APPLICANT | |
| | | | | | X M.M. D.D. 9. WITNESS/NOTARY ADDRESS AND SIGNATURE | YYYY |
| | | | | | (If required by state law) DATE SIGNED | - 1 |

Top Reasons FPCAs Cannot Be Processed:

- ☑ Inadequate or No Legal Voting Residence Address
- ☑ Inadequate or Illegible Current Mailing Address
- **☑** Illegible Writing
- **☑** Applied to Wrong Jurisdiction
- **☑** Failure to Indicate Party Preference
- **☑** No Signature
- **☑** Received Too Late
- **☑** Form Not Completed

Electronic Transmission Service

Check with your VAO for State Faxing/Emailing Rules, Instructions and Cover Sheet

DSN plus toll-free fax numbers from 51 countries

The Federal Write-In Absentee Ballot (FWAB,

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| OFFICIAL FEDERAL | WRITE-IN ABSENTEE BALLOT |
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| RESIDENT/AICE PRESIDENT | |
| S. SENATOR* | |
| S. REPRESENTATIVE/DELEGATE**RESIDENT COMMISSIONER** | |
| Legal residents of the District of Columbia may vote only for President/Air Legal residents of American Samoa, Guam, Puerto Rico and the U.S. Vi | be President and Delegate. Ight Islands may vote only for Delegate or Resident Commissioner to the Congress. |
| ome states allow the Federal Witte-In Absentee Ballot to be used by militi an Federal offices. Consult your state section in the Making Assistance Ch and thate other than those futed score, please industs in the spaces pro- tory, State Service, vic.), and the name antitre party efficient on the can | ADDENDUM If you are overseas civilian votars in elections other than general elections or for offices other twice to determine your state's policy. If you are elegible to use this belief to cote for offices' which belief, the office for which you wish to vote (for ecompte: Governor, Albamey General, distate for whom you wish to vote. |
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FWAB Usage Requirements

- 1. Used by absentee Uniformed Service members and their family members stationed inside or outside the United States.
- 2. Your request for a regular state absentee ballot must be received by the local election official at least 30 days prior to the general election or state deadline, whichever is later.
- 3. You must meet all regular requirements for voting in your state of legal voting residence *and* have not yet received the regular state absentee ballot.

Septem 2006

Send

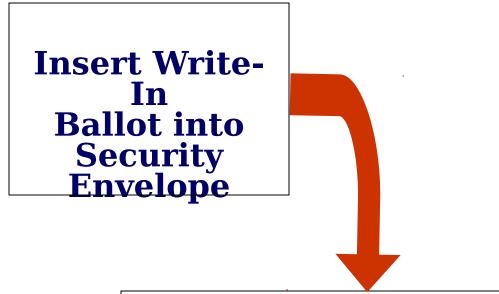
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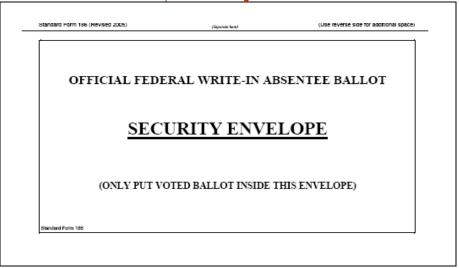
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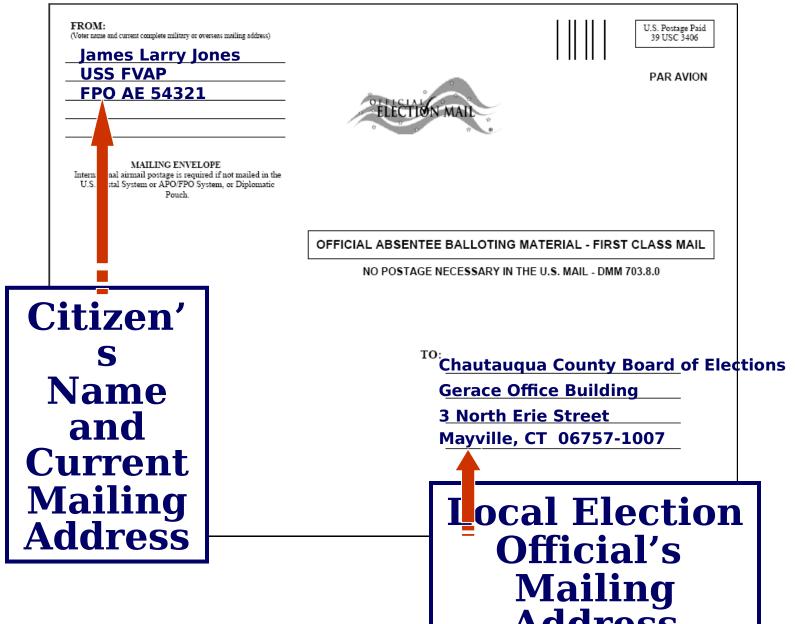
Write in candidate names or party of choice on the appropriate line, detach & fold

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| Presidentivice President | dent/Vice President |
| U.S. SENATOR* | Senator |
| U.S. REPRESENTATIVE DELEGATE **/RESS | Onrocontativo |
| * Legal residents of the District of Columbia may vote only for I | President Vice President and Delegate. |
| | the U.S. Virgin Islands may vote only for Delegate or Resident Commissioner to the Congress. |
| Some states allow the Federal Write-In Absentee Ballot to | ADDENDUM be used by military and overseas civilian voters in elections other than general |
| elections or for offices other than Federal offices. Consult | your state section in the Voting Assistance Guide to determine your state's policy. If you other than those listed above, please indicate in the spaces provided below, the office |
| | ney General, Mayor, State Senator, etc.), and the name and/or party affiliation of the |
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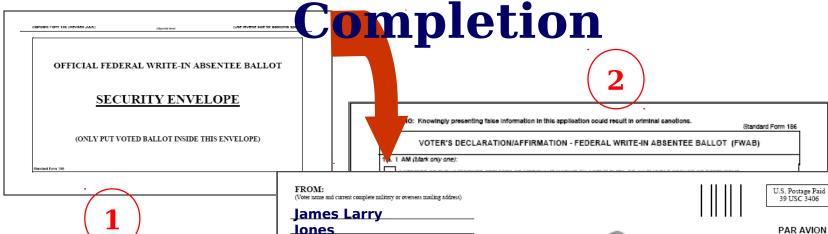


Remove tape and fold to seal Security Envelope





FWAB mpletion



International airmail postage is required if not mailed in the U.S. Postal System or APO/FPO System, or Diplomatic

Insert sealed
Security Envelope
containing (1)
Write-In Ballot
and (2) the
Voter's
Declaration/Affir
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Mailing Envelope

James Larry
Jones
USS FVAP
FPO AE 54321

MAILING ENVELOPE

OFFICIAL ABSENTEE BALLOTING MATERIAL - FIRST CLASS MAIL

NO POSTAGE NECESSARY IN THE U.S. MAIL - DMM 703.8.0

Ch<u>autauqua County Board of</u>
Elections Office Building

3 North Erie Street
Mayville, CT 06757-1007

Voter Responsibilities Registering

- **☑** States run elections
- **☑** Register to Vote using the FPCA
- **☑** Update current address
- \square Complete the FPCA according to state procedures (VAG)
- **☑** Write legibly
- **☑** Sign and Date the Form
- **☑** Send FPCA to local election office

Rememb er



- **☑** Register to vote every January
- ☑ Encourage your eligible family members to register and vote
- ☑ Visit <u>www.fvap.gov</u> often for the latest voting information
- **☑** Cast Your Ballot
- ☑ Remember to Notify Local Election Officials Whenever Your Address Changes!

Thank you for your attention



If you have any questions please see your Unit Voting Assistance Officer